

PETITION FOR TEMPORARY LETTERS OF GUARDIANSHIP OF MINOR

INSTRUCTIONS

I. Specific Instructions

1. This form is to be used for filing a Petition for Temporary Letters of Guardianship of a Minor pursuant to O.C.G.A. § 29-2-5.
2. Notice of the Petition must be given to the “parents” of the Minor. If an objection to the establishment of the temporary guardianship is filed by a parent who is also a “natural guardian,” the Court will dismiss the Petition without a hearing. If a parent who is not a natural guardian objects, a hearing on the matter will be scheduled.

A “parent” is defined as the biological or adoptive father or mother whose parental rights have not been surrendered or terminated. However, in the case of a child born out of wedlock, the Father shall be considered a “parent” only if he has legitimated the Minor.

A father of a child born out of wedlock has legitimated the Minor if he married the Mother after the child’s birth or obtained an order of legitimation from a court of competent jurisdiction.

A “natural guardian” is defined as each parent, unless the parents are divorced. If one parent has sole legal custody, that parent is the sole “natural guardian.” If both parents have joint legal custody, then both parents are the “natural guardians.”

3. Although a mother or father may not be a “legal parent,” the Court may require service on such person.
4. A temporary guardianship will be deemed to be a permanent guardianship for the purposes of obtaining medical insurance coverage for the Minor if the guardian assumes in writing the obligation to support the Minor while the guardianship is in effect to the extent that no other sources of support are available.
5. Unless otherwise permitted by the Probate Court in which the Petition is filed, a separate Petition must be filed for each minor. Contact the Probate Court in which the Petition will be filed for its policy. If the filing of one Petition for more than one minor is permitted by the Probate Court, modify the Petition accordingly.
6. According to Uniform Probate Court Rule 5.6 (A), unless the Court specifically assumes the responsibility, it is the responsibility of the moving party to prepare the proper citation and deliver it properly so it can be served according to law. All pages after the Notice regarding Uniform Probate Court Rule 5.6 (A) are to be completed by the moving party, unless otherwise directed by the Court.

7. O.C.G.A. § 53-11-2 provides that a party to a probate proceeding who is not sui juris must be represented by a guardian provided that the Court may appoint a guardian ad litem or determine that the natural guardian, guardian, conservator or testamentary guardian has no conflict and may serve. Should a guardian ad litem be necessary because a party is not sui juris, use Supplement 1.
8. Use Supplement 2 if the Court determines it is necessary to appoint a special process server.
9. Use Supplement 3 when an additional certificate of service is necessary.
10. Exhibits should be labeled at the bottom of each exhibit as Exhibit "A," Exhibit "B," etc. in consecutive order. The corresponding letter of each said exhibit should be inserted into the appropriate place in the form.
11. An oath must be administered by a Probate Judge or Clerk (the oath cannot be administered by a notary public). Use Georgia Probate Court Supplement 4 for the oath. The oath is not included in this form. Georgia Probate Court Standard Form 53, Commission to Administer Oath, can be used if the oath is to be administered by a court outside the State of Georgia.

II. General Instructions

General instructions applicable to all Georgia Probate Court Standard Forms are available in each Probate Court or at www.gaprobate.gov, labeled GPCSF 1.

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE: ESTATE OF _____)
)
) ESTATE NO. _____
MINOR _____)

PETITION FOR TEMPORARY GUARDIANSHIP OF A MINOR

The Petition of _____,
[Full name(s) of Petitioner(s)] First Middle Last

who is/are domiciled in _____ County and reside(s) at the following
address(es): _____,
Street City County State Zip Code

who has/have actual physical custody of the Minor named above and whose mailing address(es)
is/are: _____,
Street City County State Zip Code
show(s):

1.

_____,
[Full name of Minor] First Middle Last
age _____, whose date of birth is _____, is found at:
_____,
Street City County State Zip Code

2.

A copy of the Minor's birth certificate is attached as Exhibit "_____."

3.

Said Minor is in need of a temporary guardian. The Petitioner(s) has/have the following
relationship(s) with the Minor: _____.

4.

The Minor's Mother is:

<hr/>				
<i>[Full name of Mother]</i>	<i>First</i>	<i>Middle</i>	<i>Last</i>	
<hr/>				
<i>Street</i>	<i>City</i>	<i>County</i>	<i>State</i>	<i>Zip Code</i>
<hr/>				

- a. Is the Mother deceased? *[Select One]* ☐ Yes ☐ No
If yes, attach death certificate as Exhibit "_____"
and skip b-g
- b. Has the Mother signed a consent for the creation of this temporary guardianship? *[Select One]* ☐ Yes ☐ No
- c. Is the Mother's address known and listed above? *[Select One]* ☐ Yes ☐ No
- d. Have the Mother's rights been terminated via Court Order? *[Select One]* ☐ Yes ☐ No
If yes, attach the Order as Exhibit "_____."
- e. Has the Mother lost custody via Court Order? *[Select One]* ☐ Yes ☐ No
If yes, attach the Order as Exhibit "_____."
- f. Does the Mother have joint legal custody via Court Order? *[Select One]* ☐ Yes ☐ No
If yes, attach the Order as Exhibit "_____."
- g. Does the Mother have sole legal custody via Court Order? *[Select One]* ☐ Yes ☐ No
If yes, attach the Order as Exhibit "_____."
- h. Was the Mother married to the Father of the child during or after the conception of the Child? *[Select One]* ☐ Yes ☐ No
- i. Was the Mother married to another during the conception, gestation or birth of the Child? *[Select One]* ☐ Yes ☐ No
If yes, list that man's name below:

_____,
[Full name of Mother's Husband] First Middle Last

Street City County State Zip Code

5.

The Minor's Father is:

_____,
[Full name of Father] First Middle Last

Street City County State Zip Code

a. Is the Father deceased? [Select One] ☐ Yes ☐ No

If yes, attach death certificate as Exhibit "_____"
and skip b-g.

b. Has the Father signed a consent for the [Select One] ☐ Yes ☐ No
creation of this temporary guardianship?

c. Is the Father's address known and listed above? [Select One] ☐ Yes ☐ No

d. Have the Father's rights been terminated via Court [Select One] ☐ Yes ☐ No
Order?

If yes, attach the Order as Exhibit "_____."

e. Has the Father lost custody via Court Order? [Select One] ☐ Yes ☐ No

If yes, attach the Order as Exhibit "_____."

f. Does the Father have joint legal custody [Select One] ☐ Yes ☐ No
via Court Order?

If yes, attach the Order as Exhibit "_____."

g. Does the Father have sole legal custody [Select One] ☐ Yes ☐ No
via Court Order?

If yes, attach the Order as Exhibit "_____."

6.

Is the Minor fourteen years of age or older? [Select One] ☐ Yes ☐ No

If you answer "Yes," and the Minor made a selection, attach the Minor's Selection for
the Petitioner(s) to act as temporary guardian(s) as Exhibit "_____."

7.

The temporary guardianship is needed because:

8.

Additional Data: *[Where full particulars are lacking, state here the reasons for any such omission. Also, state here all pertinent facts that may govern the method of giving notice to any party and that may determine whether or not a guardian ad litem should be appointed for any party.]*

WHEREFORE, Petitioner(s) pray(s) that:

1. Service be perfected as provided by law; and
2. Petitioner(s) be appointed temporary guardian(s) of the Minor named above.

Signature of First Petitioner

Signature of Second Petitioner, if any

Printed Name

Printed Name

Mailing Address

Mailing Address

Telephone Number

Telephone Number

Signature of Attorney _____

Printed Name of Attorney _____

Address _____

Telephone Number _____

State Bar # _____

VERIFICATION

GEORGIA, _____ **COUNTY**

Personally appeared before me the undersigned Petitioner(s) who, after being duly sworn, state(s) that the facts set forth in the foregoing Petition for Temporary Letters of Guardianship of Minor (and the attached Exhibit(s)) are true and correct.

Sworn to and subscribed before me this

_____ day of _____, 20_____

Signature of First Petitioner

NOTARY/CLERK OF PROBATE COURT

Printed Name of First Petitioner

My Commission Expires _____

Sworn to and subscribed before me this

_____ day of _____, 20_____

Signature of Second Petitioner, if any

NOTARY/CLERK OF PROBATE COURT

Printed Name of Second Petitioner, if any

My Commission Expires _____

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE: ESTATE OF

_____,
MINOR

)
)
)
)

ESTATE NO. _____

SELECTION BY MINOR IF AGE 14 OR OLDER

I, the undersigned Minor, being 14 years of age or older and a resident of _____
_____ County, select _____
to be appointed my guardian(s).

This _____ day of _____, 20 ____.

Sworn to and subscribed before me this

_____ day of _____, 20____

Signature of Minor if age 14 or over

NOTARY/CLERK OF PROBATE COURT

Printed Name

My Commission Expires _____

Exhibit "_____"

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE: ESTATE OF _____

MINOR _____

ESTATE NO. _____

CONSENT OF MOTHER

I, _____,
[Full name of Mother] First Middle Last

Street City County State Zip Code

Mother of the above named Minor, do hereby consent to the creation of a temporary guardianship and the appointment of [list all parties to whom you wish to grant temporary guardianship]:

[Full name of first Temporary Guardian] First Middle Last

[Full name of second Temporary Guardian] First Middle Last

and also acknowledge service of the Petition for Appointment of a Temporary Guardian for said Minor and waive any and all further service and notice concerning said Petition.

I further understand that, pursuant to O.C.G.A. § 29-2-8 (b), upon a petition for termination by a natural guardian as defined in said statute [see instructions], the Court will remove the Temporary Guardian(s) and dissolve the temporary guardianship unless an objection is timely filed by the appointed Temporary Guardian(s). If an objection is timely filed to such petition for termination, the Juvenile Court or the Probate Court shall determine, after notice and hearing, whether a continuation or dissolution of the temporary guardianship is in the best interest of the Minor. I understand that nothing herein, including any optional Assumption by the Guardian(s) of the obligation to support the Minor to the extent that no other sources of support are available, affects my legal obligation to support and maintain said Minor.

Sworn to and subscribed before me this
_____ day of _____, 20_____.

Signature of Mother

NOTARY/CLERK OF PROBATE COURT

Printed Name of Mother

My Commission Expires _____

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE: ESTATE OF

MINOR

)
)
)
)

ESTATE NO. _____

CONSENT OF FATHER

I, _____,
[Full name of Father] First Middle Last

Street City County State Zip Code

Father of the above named Minor, do hereby consent to the creation of a temporary guardianship and the appointment of *[list all parties to whom you wish to grant temporary guardianship]*:

[Full name of first Temporary Guardian] First Middle Last

[Full name of second Temporary Guardian] First Middle Last

and also acknowledge service of the Petition for Appointment of a Temporary Guardian for said Minor and waive any and all further service and notice concerning said Petition.

I further understand that, pursuant to O.C.G.A. § 29-2-8 (b), upon a petition for termination by a natural guardian as defined in said statute *[see instructions]*, the Court will remove the Temporary Guardian(s) and dissolve the temporary guardianship unless an objection is timely filed by the appointed Temporary Guardian(s). If an objection is timely filed to such petition for termination, the Juvenile Court or the Probate Court shall determine, after notice and hearing, whether a continuation or dissolution of the temporary guardianship is in the best interest of the Minor. I understand that nothing herein, including any optional Assumption by the Guardian(s) of the obligation to support the Minor to the extent that no other sources of support are available, affects my legal obligation to support and maintain said Minor.

Sworn to and subscribed before me this
_____ day of _____, 20_____.

Signature of Father

NOTARY/CLERK OF PROBATE COURT

Printed Name of Father

My Commission Expires _____

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE: ESTATE OF

MINOR

)
)
)
)

ESTATE NO. _____

ASSUMPTION OF OBLIGATION TO SUPPORT (OPTIONAL)

The undersigned, if appointed temporary guardian(s) of the above named Minor, assume(s) the obligation to support the Minor while the guardianship is in effect to the extent that no other sources of support are available.

Sworn to and subscribed before me this

_____ day of _____, 20_____.

Signature of First Petitioner

NOTARY/CLERK OF PROBATE COURT

Printed Name of First Petitioner

My Commission Expires _____

Sworn to and subscribed before me this

_____ day of _____, 20_____.

Signature of Second Petitioner, if any

NOTARY/CLERK OF PROBATE COURT

Printed Name of Second Petitioner, if any

My Commission Expires _____

Exhibit "_____"

INFORMATION REGARDING
TEMPORARY GUARDIANSHIP OF MINOR(S)

The following information, in whole or in part, may be forwarded or divulged to protection and law enforcement agencies for the purpose of an investigation germane to the best interest of the child(ren).

1. INFORMATION ON EACH CHILD

(If more than one child, give all information on this page for each child on a separate page)

Child's Full Name as shown on Birth Certificate:

1. _____

Child's present address, the location where they slept last night.

Street Apt. City State Zip

How long has child lived at this address? _____

Date of birth _____ Age _____ Sex _____

Race/National Origin _____ Grade in School _____

School last attended _____

2. INFORMATION ON PARENTS

Mother's Full Name _____

Address _____
Street Apt. City State Zip

Telephone (Home) _____ (Work) _____

Date of Birth _____ Race/National Origin _____

Place of Employment _____

1. Was the mother married to the father at the time of child's conception or birth? Yes _____ No _____

2. Was the mother married to someone that was not the father at the time of the child's conception or birth? Yes _____ No _____

3. Did the mother and father of the child marry after the child's birth? Yes _____ No _____

4. Did the mother and father ever file for divorce? Yes _____ No _____

Father's Full Name _____
Address _____
Street Apt. City State Zip
Telephone (Home) _____ (Work) _____
Date of Birth _____ Race/National Origin _____
Place of Employment _____

Sisters and brothers of the child(ren) (the information below can be listed for all children)

Name Age Address (include street #, apt, city, state and zip code)

3. INFORMATION RELATING TO PAST HISTORY THIS MUST BE COMPLETED

Has child(ren) been in a foster home or removed from parental custody? _____
If so, by what authority: (D.F.A.C.S.? _____) What county? _____
Juvenile Court Order? _____ What county? _____ Other? _____

YOU MUST TELL THE WHOLE TRUTH. EXPLAIN THE CIRCUMSTANCES. (Use additional sheet if necessary).

4. IS THERE NOW OR HAS THERE EVER BEEN A TEMPORARY GUARDIAN APPOINTED FOR THE CHILD(REN)?

IF SO, NAME OF COUNTY WHERE TEMPORARY GUARDIANSHIP WAS GRANTED. PROBATE COURT OF _____ COUNTY.

5. INFORMATION ON PERSON(S) APPLYING TO BE GUARDIAN

Guardian's Full Name _____
Date of birth _____ State of Birth _____ Race/National Origin _____
Address _____
Street Apt # City State Zip
County Telephone (Home) _____ (Work) _____
Place of Employment _____ Supervisor's Name _____
Marital Status _____ Full Name of Your Spouse _____
How are you related to this child? _____
For checking criminal history background purposes only: Your Social Security # _____
Have you ever been convicted of a felony? _____ If so, for what, when, and where convicted?

2nd Guardian's Full Name _____

Date of birth _____ State of Birth _____ Race/National Origin _____

Address _____

Street _____ Apt # _____ City _____ State _____ Zip _____
County _____ Telephone (Home) _____ (Work) _____

Place of Employment _____ Supervisor's Name _____

Marital Status _____ Full Name of Your Spouse _____

How are you related to this child? _____

For checking criminal history background purposes only: Your Social Security # _____

Have you ever been convicted of a felony? _____ If so, for what, when, and where convicted?

List the name, age and relationship to you of all other minor children in your home.

Have you resided somewhere other than Clayton County during the last ten (10) years? _____

If so, list prior address(es) _____

List two personal references, **who live in this area**, with addresses and telephone numbers. (Your references must be someone other than close relatives and not related to you by blood or marriage.)

First Reference: _____

Name	Street	Apt #
City	State	Zip
Telephone Number		

Second Reference: _____

Name	Street	Apt #
City	State	Zip
Telephone Number		

LIST ALL OTHER ADULTS LIVING IN YOUR HOME:

Name

Age

Relationship to you

STATE THE REASON THIS GUARDIANSHIP IS NECESSARY (explain in detail).

(Note: "The child wants to live with me" or "His parents decided they wanted the child to live with me, "or "The child just wants to go to school here" **is not sufficient reason for guardianship.** You must explain the circumstances.

I understand that furnishing false (untrue) information to the Court may result in criminal action being taken against me.

Sworn to and subscribed before me this
_____ day of _____ 20_____.

Guardian

Clerk of Probate Court/Notary Public

2nd Guardian

The undersigned does consent to being investigated and appointed as temporary guardian (s) of the above-named minor and does/do further hereby acknowledge service of the foregoing Petition.

Sworn to and subscribed before me this
_____ day of _____ 20_____.

First Petitioner Signature

Clerk of Probate Court/Notary Public

Print Name

Sworn to and subscribed before me this
_____ day of _____ 20_____.

Second Petitioner Signature

Clerk of Probate Court/Notary Public

Print Name

ANSWER THE FOLLOWING QUESTIONS:

1. Is the mother of this child a resident of Clayton County, Georgia? Yes ____ No ____
Is the father of this child a resident of Clayton County, Georgia? Yes ____ No ____
2. Do the parents of this child realize that they are giving up their parental rights insofar as custody and control, but probably have continuing responsibility for support, maintenance, and the duty to provide necessities for this child? Yes ____ No ____
3. Do you and the natural parents realize that all parental rights can only be severed by the Juvenile Court of proper jurisdiction upon a due process hearing for that purpose, or by the Superior Court of proper jurisdiction as an adjunct to an adoptive proceeding?
Yes ____ No ____
4. Is the home where the child has been living so deprived that the best interest of the child demands removal? Yes ____ No ____
5. Is your home, environment and circumstance a better nurturing condition for this child?
Yes ____ No ____
6. Do you contend that your guardianship is required:
Indefinitely _____ or Temporarily, only _____
7. Which school will the child(ren) attend?

Child	School	Complete address for school
-------	--------	-----------------------------

1. _____
2. _____
3. _____

Provide any additional information deemed important for this Court in considering the best interest of the child(ren):

Clayton County Probate Court
121 S. McDonough Street, Annex Bldg. 3
Jonesboro, GA 30236
770-477-3299

Minor

Case Number

Minor

Minor

TEMPORARY GUARDIANSHIP ACKNOWLEDGMENT

I, _____, being the petitioner for the above-named minor, hereby acknowledge that my Petition for Temporary Guardianship is being filed today, and I am receiving my letter that will allow such child to be enrolled in school.

In the event I am not contacted in 20 days, it is my responsibility to contact this court to determine if all necessary documents and information has been received. I also understand that in the event something is lacking and I fail to provide such, this petition may be dismissed. I also understand that in the event my petition is dismissed, I understand I will need to pay the filing fee again to have a new Petition for Temporary Guardianship should one still be necessary.

Below is my contact information:

Address:

Phone Numbers:

This _____ day of _____, 20_____.

Signature of Petitioner

Printed Name of Petitioner

Signature of Petitioner

Printed Name of Petitioner

Witnessed by Clerk

CONTACT INFORMATION

Estate of:

Minor

Estate No. _____

Address of Petitioner:

Phone Numbers:

Cell: _____

Home: _____

Work: _____

Other: _____

Email: _____

By signing below, I am stating that I understand that I must appear on the court date below. **I also understand that this is the only notice I will receive of such hearing.** In addition, I understand that certain information is needed to complete my petition. I understand I must provide such information **prior to the court** date below or my petition will be denied. I also understand additional fees may be assessed that must be rendered before the Judge can sign any documents.

_____ I must provide all information listed below:

_____ The initial information required to file my petition regarding the above-mentioned estate case has been provided; however, I understand I will be sent a letter at the above address should additional information be necessary. Should I be sent a request for further information, I understand that I must provide The Court with that information **prior to my hearing date.** I also understand additional fees may be assessed that must be rendered before the Judge can sign any documents.

FOR COURT USE ONLY:

TERM OF COURT DATE: _____

_____ AT 9:00 AM

Petitioner's Initials: _____

Clerk's Initials: _____

Clayton County Probate Court
121 S. McDonough Street, Annex 3
Jonesboro, GA 30236
770-477-3299

Signature of Petitioner (#1):

Printed Name of Petitioner (#1):

Signature of Petitioner (#2):

Printed Name of Petitioner (#2):

Witnessed by Probate Court Clerk

Today's Date: _____

FOR COURT USE ONLY:

FEES DUE: _____